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DECLARATION FOR UTILITY OR

| DECLARATION | SIGN | | irst Named Inventor | Thomas | Tseng | |
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| PATENT APPLICATION | | C | OMPLETE IF | KNOWN | | |
| (37 CF | R 1.63) | . 7 | Application Number | | | |
| Declaration | Declarati | on | Filing Date | | | |
| Submitted OR With Initial | Submitte Filing (su | ed after Initial | Art Unit | | | |
| Filing | (37 CFR required) | 1.16 (e)) | Examiner Name | | | |
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| I hereby declare that: | • | | | | | |
| Each inventor's residence, ma | illing address, ar | nd citizenship are a | s stated below next to | their name. | | |
| I believe the inventor(s) name | | | nventor(s) of the subj | ect matter w | nich is claimed a | nd for |
| which a patent is sought on th | | iea: | <u> </u> | | <u> </u> | |
| Modular Entertainmen | t System | | | | | |
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| Abo an arification of reliab | | (Title of the li | nvention) | | | |
| the specification of which | | · | • | | | • |
| is attached hereto | | • | | | | |
| OR | | | | | | |
| was filed on (MM/DD/Y | YYY) | | as United States A | Application N | umber or PCT In | ternational |
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| Application Number | | • | on (MM/DD/YYYY) | | | applicable). |
| I hereby state that I have revie amended by any amendment | | | of the above identified | l specification | n, including the c | laims, as |
| I acknowledge the duty to di | sclose information | on which is materi | al to patentability as | defined in | 37 CFR 1.56. in | cluding for |
| I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. | | | | | | |
| I hereby claim foreign priority | benefits under | 35 U.S.C. 119(a)- | (d) or (f), or 365(b) | | | |
| inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign | | | | | | |
| application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date | | | | | | |
| Prior Foreign Application | n which priority | is claimed. Foreign Filing | Data Bri | ority | Certified Copy | Attached? |
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| Additional foreign applicat | ion numbers are | e listed on a suppler | mental priority data st | neet PTO/SR | /02B attached by | ereto |
| Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. | | | | | | |

[Page 1 of 2]

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PTO/SB/01 (06-03)

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| NAME OF SOLE OR FIRST IN | VENTOR: | A p | etition | | en filed for th | is unsign | ed inventor |
| Given Name | | | | | amily Name | | |
| (first and middle [if any]) Thomas | • | | | P | Surname seng | | • |
| | <u> </u> | | | | | | <u>r _ </u> |
| Inventor's | | | | • | | | Date |
| Signature Ann | uso | 7 | • | | • | | 10-6-03 |
| Residence: City | State | | Coun | try | | Citizen | nship |
| La Habra Heights | California | | US | | | Taiwan | · · · · · · · · · · · · · · · · · · · |
| Mailing Address 1517 Peppertree Drive | | | | | • | | |
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| La Habra Heights | California | | | 90631 | | ļ | us |
| NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor | | | | | | | |
| Given Name | | | | | mily Name | • | |
| (first and middle [if any]) | | | | or | Surname | | |
| Inventor'ś Signature | | | | • | | | Date |
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| Additional inventors or a local re- | presentative are being named on | the 4 | sunnleme | ntal shee | et(s) PTO/SB/02/ | or not B a | attached hereto |
| Auditional inventors of a legal re | presentative are being named on | | applettle | mai silet | ((3)1 10/30/02F | · OI UZLIN 8 | maoned hereto. |

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

| Application Number | |
|------------------------|------------------------------|
| Filing Date | |
| First Named Inventor | Thomas Tseng |
| Title | Modular Entertainment System |
| Art Unit | |
| Examiner Name | |
| Attorney Docket Number | · |

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| X A | oplicant/Inventor. | · · | | | | | |
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| Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) | | | | | | | |
| SIGNATURE of Applicant or Assignee of Record | | | | | | | |
| Name | Thomas Ts | sena A | . 1 | | • | | |
| Signature (Marino) | | | | | | | |
| Date | 10-6- | 03 | | | Telephone | (626) 810-6655 | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | | | | |
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| *Total of forms are submitted. | | | | | | | |

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PTC/SB/09 (12-97)
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| STATEMENT CLAIMING SMALL ENT (37 CFR 1.9(f) & 1.27(b))INDEPENDE | | Docket Number (Optional) |
|---|---|--|
| Applicant, Patentee, or Identifier: Thomas | Гseng | |
| Application or Patent No.: | | · |
| Filed or Issued: | | • |
| Title: Modular Entertainment System | | |
| | · · · · · · · · · · · · · · · · · · · | |
| As a below named inventor, I hereby state that for purposes of paying reduced fees to the Par | | |
| the specification filed herewith with title | e as listed above. | |
| the application identified above. | | |
| the patent identified above. | | |
| I have not assigned, granted, conveyed, or lic grant, convey, or license, any rights in the inver under 37 CFR 1.9(c) if that person had made business concern under 37 CFR 1.9(d) or a no | ntion to any person who would not qu the invention, or to any concern wh | alify as an independent inventor ich would not qualify as a small |
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| entitlement to small entity status prior to pay maintenance fee due after the date on which | ying, or at the time of paying, the | earliest of the issue fee or any |
| Thomas Tseng | | |
| | INVENTOR | NAME OF INVENTOR |
| (Innus) | | |
| Signature of inventor Signature | of inventor | Signature of inventor |
| 10-6-03 | | |
| Date Date | • | Date |
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